| DEC. | TRANSMITTAL FORM | | | atent and T | rademark ormation 5 r 25, 200 Moore e | |
|------|---|-----|--|-------------|---|---|
| | Total Number of Pages in This Submission | | | | | |
| | | ENC | LOSURES (Check all | that apply |) | |
| • | Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocatior Change of Correspondence A Terminal Disclaimer Request for Refund CD; Number of CD(s) Landscape Table on CD rks | ddress | Retu | After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Irrn Receipt Postcard |

| CERTIFICATE OF TRANSMISSION/MAILING | | | | | | |
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| I hereby certify that this c sufficient postage as first the date shown below: Signature | | | | | | |
| Typed or printed name | Scott W. Kelley | | | Date | December 2, 2004 | |

Reg. No.

30,762

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Signature
Printed name

Date

KELLY LOWRY & KELLEY, LLP

Scott W. Kelley

December 2, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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|--|---|----------------|------------------------------|---------------|
| Effective on 6701/2004. Patent fees are subject to annual revision. | | Complete if Kn | own | |
| FEE TRANSMITTAL | Application Number | 10/672,48 | | |
| PEE IRANSWIIIAL | Filing Date | September | 25, 20 | 03 |
| For FY 2005 | First Named Inventor | Rodney K. | Moore | et al. |
| X Applicant claims small entity status. See 37 CFR 1.27 | Examiner Name | Kim T. Ng | guyen | |
| Time to the second seco | Art Unit | 3713 | | |
| TOTAL AMOUNT OF PAYMENT (\$) 545.00 | Attorney Docket No. | WINNO-447 | 06 | |
| METHOD OF PAYMENT (check all that apply) | FEE CAL | CULATION (| continued) | |
| Check Credit Card Money Order | 2. EXTRA CLAIM F | EES | | Small Entity |
| Tax check Clean Card Wolley Order | Fee Description | | <u>Fee (\$)</u> | Fee (\$) |
| Deposit Account None | Each claim over 20 Each independent cla | im over 3 | 18 88 | 9 44 |
| Deposit | Multiple dependent c | | 300 | 150 |
| Account | For Reissues, each cla | | | 130 |
| Number Deposit | more than in the ori | | 18 | 9 |
| Account | For Reissues, each in | | m | |
| Name L | more than in the ori | ginal patent | 88 | 44 |
| The Director is hereby authorized to: (check all that apply) | Total Claims | Extra Claims | Fee (\$) | ee Paid (\$) |
| Charge fee(s) indicated below | 18 - 20 or HP = HP = highest number of to | | x 9 = | <u> </u> |
| Charge fee(s) indicated below, except for the filing fee | Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
| Charge any additional fee(s) or underpayments of fee(s) | 3 or HP = | | x <u>44</u> = | |
| under 37 CFR 1.16 and 1.17 | HP = highest number of in | | | |
| Credit any overpayments | Multiple Dependent CI | <u>aims</u> | <u>Fee (\$)</u> | Fee Paid (\$) |
| to the above-identified deposit account. | | | | |
| I | | Subtotal | (2) \$ | 0.00 |
| Other (please identify): | 3. OTHER FEES | | Small Entit | ν |
| WARNING: Information on this form may become public. Credit card | Fee Description | Fee (\$) | Fee (\$) | Fee Paid(\$) |
| information should not be included on this form. Provide credit card information and authorization on PTO-2038. | 1-month extension of tir | 110 | 55 | |
| FEE CALCULATION | 2-month extension of tir | ne 430 | 215 | |
| 1. BASIC FILING FEE | 3-month extension of tir | ne 980 | 490 | <u>490.00</u> |
| Small Entity | 4-month extension of tir | ne 1,530 | 765 | |
| Fee Description Fee (\$) Fee (\$) Fee Paid(\$) | 5-month extension of tir | ne 2,080 | 1,040 | |
| Utility Filing Fee 790 395 | Information disclosure s | stmt. fee 180 | 180 | |
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| 1. BASIC FILING FEE Small Entity | | | | 4-month extension of time | 1,530 | 765 | |
| Fee Description | Fee (\$) | Fee (\$) | Fee Paid(\$) | 5-month extension of time | 2,080 | 1,040 | |
| Utility Filing Fee | 790 | 395 | ************ | Information disclosure stmt. fee | 180 | 180 | |
| D . D D | 260 | | | 37 CFR 1.17(q) processing fee | 50 | 50 | |
| Design Filing Fee | 350 | 175 | | Non-English specification | 130 | 130 | |
| Plant Filing Fee | 550 | 275 | | Notice of Appeal | 340 | 170 | |
| Reissue Filing Fee | 790 | 395 | | Filing a brief in support of appeal | 340 | 170 | |
| reassuo i imig i co | ,,, | 373 | | Request for oral hearing | 300 | 150 | |
| Provisional Filing Fee | 160 | 80 | | Other: <u>Statutory Disc</u> 1 | Laimer | | 55.00_ |

| SUBMITTED BY | | | |
|-------------------|-----------------|--|------------------------|
| Signature | Algo Heller | Registration No. (Attorney/Agent) 30,762 | Telephone 818-347-7900 |
| Name (Print/Type) | Scott W. Kelley | | Date 12-02-2004 |

Subtotal (3) \$

545.00

0.00

Subtotal (1) \$

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